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ABSTRACT

The first of a 10-part series, this report was compiled by the Educational Development Center at Wilkes College. The series deals with various aspects of the treatment of delinquents and is intended as a summary of research findings in each of the areas treated. Each report was prepared by a scholar-practitioner and is presented in a way that will be of value to professionals who deal both directly and indirectly with the treatment of delinquent youth. The report is, in fact, one manuscript of 627 pages; however, to make it more easily used, it is published in 10 separate parts. A detailed table of contents of the entire series is presented at the end of each part. This part examines some characteristics of neglected and delinquent youth; types of social and emotional maladjustment; the role of the family; and various types of counseling and other forms of treatment. (Author)

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THE TREATMENT OF DELINQUENCY SERIES
AN EDC REPORT

CHAPTER 1

Neglected and Delinquent Youth: Demographic Findings

David A. Sabatino

Northern Illinois University

U.S. DEPARTMENT OF HEALTH, EDUCATION & WELFARE
NATIONAL INSTITUTE OF EDUCATION

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Editor's Preface

This report is part of a ten part series compiled by the Educational Development Center at Wilkes College. The series deals with various aspects of the treatment of delinquents and is intended as a summary of research findings in each of the areas treated. Each report was prepared by a scholar-practitioner and is presented in a way that will be of value to those whose calling has led them to educational careers dealing both directly and indirectly with the treatment of delinquent youth. The report is, in fact, one manuscript of 627 pages; however, to make it more easily used, it is published in ten separate parts. A detailed table of contents for the entire series is presented at the end of this part.

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We invite any and all comments and/or inquiries concerning this series.

Joseph A. Skok, D.P.A.

Director
Educational Development Center

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CHAPTER I

NEGLECTED AND DELINQUENT YOUTH: DEMOGRAPHIC FINDINGS

David A. Sabatino

INTRODUCTION

The intent of the discussions to follow is to provide the teacher, pupil personnel worker, and administrator of public and private institutions with usable plans of actions, current theorization, and research findings on delinquent youth. The content of this chapter should serve to address the age-old demographic issues of delinquency, behavioral characteristics, definitions, concomitant handicaps, recidivism, and a review of current educational practices. Other chapters will discuss the development of career education plans, behavioral modification, arithmetic and reading remediation, current administrative practices, delineation of prevention, rehabilitation, and punishment. These selected readings are written for educators; and unlike most of the other resources available, they approach the topic from an instructional frame of reference. They represent the descriptive, programmatic, and theorization of sociologists, behaviorists, psychiatrists, anthropologists, nutritionists, and other associated fields. There is,

however, little written by educators for educators. That suggests that the one discipline that probably spends more face-to-face time with chronically disruptive youth, than another, has had the least to say, and the least to read.

It is generally agreed that of the many ways to arrive at a decision, one of the very best is to be prepared on the subject at hand. We do not wish to imply that the material, ideals, suppositions, postulates, or practices reviewed or expressed within these pages represent the sum and substance of all there is to know about the educational and behavioral management of norm-violating youth. But, rather, it should set forth contributory information that may assist practicing educators in assessing their practices, and to feel supported in their beliefs or practices or to gain new insights. We invite you to read and agree, read and disagree, read and update this work with that of your own. Again, our purpose is to provide for the mutual struggle to identify the best practices to correct the educational amelioration with society's injured youth.

WHO ARE NEGLECTED AND DELINQUENT YOUTH?

Neglect is a term that has both legal and human implications. The laws of most states cite neglect as one of the three major contributors necessary for initial investigative and/or judicial action

against parents or guardians. Neglect, as well as incorrigibility, and delinquency are used as criteria in most legal codes regarding the management of children and their conduct. Neglect is the term most frequently found in affidavits charging parents with failure to discharge their duty responsibly.

The physical component of neglect is not hard to substantiate in court: a child is malnourished, sick, ill clothed--generally in a miserable physical state. But the emotional component of neglect, to which legal codes in many states refer, is difficult to establish, even though we know that it is prevalent in families at all socioeconomic "levels." Emotional neglect typically reflects on the quality of the parent-child relationship, but a host of factors--such as religion, ethnic background, race, values, beliefs, and the immediate conditions of the larger society, as well as the respective home--are also involved in it. Black urban, rural Appalachian, and native American cultures and subcultures are distinctly different, and their differences are magnified in child-rearing practices. A Navajo family may walk twenty miles to a package liquor store where children will be front-row observers as mother and father drink to intoxication. For this particular culture, however, this does not constitute "neglect," leading possibly to delinquency as it might for others. Rather, it is at this time an established cultural expectation of regular occurrence; one consequence is that it is likely to reproduce itself in the next generation.

One may find dogmatic statements in the literature on delinquency. Reckless (1967), for example, has stated that children from the same home, living in an urban renewal area in a major city, who share similar physical and possibly emotional experiences, have an equal chance of becoming criminals or law enforcement officials. The fact is, however, that we do not presently possess comprehensive knowledge of the causes of delinquency or neglect or any good notion why particular children in given families respond negatively to the child-rearing practices and attitudes they experience in homes or institutional placement. Certainly, there is no single theory which offers the answer. A patchwork of theories does exist. These theories include:

1) Genetic Transmission Theories. Early naturistic criminologists believed in inherited criminality or degeneracy, contending that behavior is biologically determined. This idea held for two decades and implied that physical structure dictated social functioning.

2) Bad Parents. Most criminologists have attributed delinquency to lack of parental guidance and discipline. They point out that increases in broken homes parallel the rise in delinquency.

3) The Bad Boy Theory. The antithesis of the "bad parent" theory is the "bad boy" theory which states that delinquency begins in the child's ear. "You are a bad boy." But children tend to role play within the expectations of their parents or friends. If told they

are bad, punished frequently, and provided positive reinforcement for certain acts, they may incorporate such a view of self and attempt to actualize the role placed upon them.

4) The Defective Parent-Child Relationship. This is the "generation gap" concept which states that the parents (adults over 30) just do not understand the clothes, music, dances, or even the vocabulary of the now generation. The insistence from both of these groups that a real difference exists in nature only amplifies the tendencies of one or the other group to actually be different. Communication, its absence or difficulty, is the "whipping boy" in this theory.

5) The School's Fault Theory. This theory emphasizes the school's dominant role in the life of children as society moves from a primary social system centering on the home to a community-based urban setting. The school is considered as having failed to communicate appropriate values to children. "Grades" not "honesty" are said to have been emphasized as an example of the loss in real human values.

6) The Economic Pressure Theory. Since most neglected and delinquent children are black, from the inner city, or both, their delinquency is seen as being directly related to poverty, housing, and associated family conditions.

7) The Delinquent Gang Theory. This theory emphasizes association with "bad boys" since "evil

communications corrupt good manners." The argument is that social values of the gang serve to unbalance and replace the value structures of the larger society which the subgroup feels are not applicable to the cultural settings where the gang operates.

8) The Mental Illness Theory. This theory holds that all who are neglected or neglect others must suffer from psychopathology. There is a widely held belief that delinquents are emotionally maladjusted and need psychotherapy.

9) The Asocial Theory. This theory holds the position that some children simply do not learn appropriate values and the mores congruent with society; they live for and value what is appropriate or expedient for the moment.

10) There are other theories stressing inadequate recreation facilities, physical weakness, underdeveloped expressive vocabularies resulting in physical aggression (Billy Budd Syndrome), hostility toward an alien culture, rejection by parents or the home for a multitude of reasons, and the message of crime and violence conveyed through mass media, for example, television.

SOCIAL MALADJUSTMENT

Central to an understanding of neglect or delinquency is recognition of a child's specific problem or disability. Awareness that he

has a definitive handicap, chronic illness, or some acute problem that needs attention will help us both to understand and to obtain services for him. It is very difficult in studying social maladjustment, however, to determine whether genuine differences exist among the "originally maladjusted" children who exhibit "normal" adjustment problems. The hostility, aggressiveness, or withdrawn behavior a child may exhibit might rightly or even necessarily be considered part of his "normal" adjustment processes. Normal adjustments to life can require children to react in a manner magnified out of proportion according to the standard of the so-called "normal" adult world.

Any situation which is threat producing to a child poses a danger to his physical or emotional well being. Emotional neglect, multiple mothering, and parental rejection are stressful to most children and may be threatening. A child, for example, facing institutionalization may fear separation from his mother. His fear here may attack his other emotional supporting structures, such as feelings of security at home, his personal identity, and his feelings of belonging. His emotional reactions as themselves are adjustment processes. Adjustment implies that a child is interacting in a satisfactory manner with a particular environment or environmental situation in which he finds himself. Within a given period of time, all of us adjust or readjust to constant environmental changes. For the majority of children, maladjustment is a temporary process which will pass with the time that it takes to remove the threat and residual anxiety.

The rules which govern behavior in our society sometimes provide situations in which a person may exhibit anger, fear, affective warmth, or hostility and still be seen as showing normal adaptive mechanisms. A soldier may display extreme emotionality under wartime conditions and still be considered as demonstrating normal behavior. However, the same reaction by the same man in a peacetime office where the stress might be equally as great would be considered evidence of maladaptive behavior under society's rules.

SOCIAL-EMOTIONAL MALADJUSTMENT

Two distinct concepts are usually implied by the terms emotional and social maladjustment. One may distinguish social from emotional maladjustment by examining the interaction of the individual under stress.

Basically, an emotionally maladjusted child lives with total disregard for most social-environmental situational interactions. Such a child's responses to a given social situation are impaired by faulty adjustment mechanisms which result in extremes of overt behavior ranging from aggressive destruction of self or others to total withdrawal from people and things. Emotional maladjustment is neither temporal nor related to the immediate situation or environment.

Social adjustment or maladjustment, on the other hand, tends to be dependent upon, or interrelated with, the context of the immediate environment. It is generally regarded as emerging over difficulties in interpreting societal rules or the inability or unwillingness to adapt to particular environmental situations. Socially maladjusted children show behaviors such as aggressiveness, withdrawal, and other behaviors which may be reinforced by their securing attention. Common examples of social maladjustment are seen in delinquent acts committed by juveniles. Pate (1963) describes social maladjustment as follows:

> Socially maladjusted children are chronic juvenile offenders who regularly disregard broader social values and rules as a matter of course, substituting in their stead the values and rules of their peer group. They make up delinquent gangs who are constantly in trouble with the law. Their accepted code of conduct is truancy, fighting, and defiance against constituted authority. Socially maladjusted children are handicapped by their provincial patterns of social values . . . [p. 240].

One must be aware of the fact that psychosocial adaptation of a given individual to his environment represents a total adjustment process; that is, each person is determined by how well he thinks he feels, what is happening in his immediate family and vocational life, as well as his ability to use psychological adjustment mechanisms. Equally important, overt behavior does not always give a true picture of personal state; pseudo-adjustment phenomena are real. An individual may present a state of good adjustment when, in fact, he is troubled. Prevalent is the substitution by the child of socially

acceptable physical symptoms, selected from established patterns of illness, as a means of expressing his problems, for feelings the child senses he cannot otherwise express. The hidden problems are much more serious than the overt behavior symptoms.

It seems necessary to develop systematic ways of looking at human adjustment and/or how each aspect interacts to promote or inhibit that process. One may look at psychosocial adjustment as being influenced by biological, sociocultural, and psychological concerns. (See Figure 1.)

The adaptation of man to his environment is dependent upon a variety of identifiable features or variables. The biological factor includes how his body performs, absence or presence of physical pain, sensory functioning. Biological fact is basic to man's view of self and of the world. But it is the total interaction of all factors--the biological, sociocultural, and psychological--which form the complex whole involved in adaptation. Not all children want to be football players, but some do because of a desire for the social recognition football players receive. Physically a boy may not have the size or endurance to play football, and he must then either adapt or enter a nonadjusted phase of living. The type of environment in which he grows up and the abilities he has or lacks render him more or less adjusted.

Similarly, a high school senior girl who wants to be a nurse may have been reared in a setting which gave her limited opportunities

FIGURE I

PSYCHOSOCIAL ADAPTATION

From: J. B. Richmond, "Introduction," Mental Retardation: A Handbook for the Primary Physician, p. xiv, 1964. Reproduced with the permission of the Journal of the American Medical Association.

to develop her vocabulary. She may have entered school with relatively underdeveloped speech and language facility, and she may have been a poor reader and disliked school. Her academic progress in the grades may have suffered to the extent as to deprive her of the opportunity to take algebra, physics, and chemistry when she entered high school; as a senior, her applications for nurse's training are rejected. Again, the result is due to biological, sociocultural, and psychological variables acting together. As a consequence the girl, 18 years of age, must now readjust her dream and expectations for life or suffer continuing frustrations. Whether she can modify her expectations and accept the lower status of nurse's aide, working in the hospital kitchen, or successfully working toward other goals will depend upon the strength and balance of her psychosocial adaptive mechanisms.

TYPES OF SOCIAL MALADJUSTMENT

Three major types of social maladjustment are generally defined--in relation to social values--as asocial, dysocial, or antisocial.

Asocial implies being without knowledge of social rules or morals. An example may be given in the case of a five-year-old child who was brought to a hospital outpatient clinic for a preschool examination. He has little language except grunts and gestures. His overt

behavior is filled with gross, aggressive acts of hitting, biting, and kicking. His social adjustment is comparable to the "negativism" characteristic of a two-year-old, yet he shows normal intelligence on commonly used nonverbal intelligence tests. The case history shows that he has been in seven different homes, has had multiple mothering, and never knew his father. Not surprisingly, he does not know how to act appropriately; he has not internalized societal rules, not even those normally in the repertoire of a five-year-old child.

In the dysocial type of maladjustment, a person is presented with conflicting events or positions reflecting important social values. As a child he has learned that rules are not to be broken; for example, he should never steal from others. Upon entrance into school, he may find that children from other homes steal, and they have regard for one conduct rule only--it is wrong to be caught. The child in question is now confronted with dysocial values; that is, two opposing views which seemingly apply to the same social situation.

The third type, the antisocial condition, characterizes the public's view of most delinquents who are brought to the attention of the court. The antisocial youth has indeed learned values consistent with those taught by society. But as a result of gang or personal pressure, he violates those values and thus comes into confrontation with society's norms and the law.

Two other diagnostic categories associated with social disability are character disorders and transient situational personality disorders.

Character disorders are manifested as habitual types of behaviors which draw unfavorable attention to the person. They are not the result of either mental retardation or psychopathology; the person is not mentally disturbed. Character disorders may simply be described as an individual's possession of some behavioral characteristic that disturbs others. An example is the child described as having a "mean streak;" he bullies smaller children. He does not have a mental disorder in the sense that his behavior is driven by neurotic anxieties or that he is psychotic. He likes to boss, direct, and influence weak and smaller children, perhaps because he cannot express this need for dominance with children his own age.

The following example distinguishes the character disorder from the psychopathological personality disorder. One child expresses aggressive, hostile behavior in a socially disapproved manner by bullying smaller children. Another child tends to withdraw, unable to express his frustrations and hostility openly, and displays such behavior as building and lighting fires in homes. The former displays a character disorder while the latter exhibits a more serious personality disorder.

There is a large gray area between the child who recognizes that he should not "pick on" children smaller than he, and the

withdrawn child whose anxiety causes him to express feelings and inpulses that he cannot explain and seemingly has no power to control.

Between the character disorder and acute personality disorder is the area of transient situational personality disorder. It falls under the heading of social maladjustment and not emotional maladjustment because of its transient nature. The most important characteristic of the transient situational personality disorder is that while the child frequently displays the more severe manifestation associated with neurotic anxieties, the resulting overt behaviors that he displays can be explained in rational terms by the child and understood when sufficient information is presented.

THE WITHDRAWAL-AGGRESSION CONTINUUM

A first step in the management of a child's reaction to a stressful situation (for example, being separated from his mother) is to isolate the triggering mechanism. Once this is understood by both the nurse and the child, a relationship may be established that will reduce the stresses and negative emotion involved and promote a sense of security which will help the child to deal with other stresses. If this does not happen, the child's disturbed behavior will continue and the situation may eventually produce the kinds of maladjusted

responses frequently associated with passive-aggressive and passive-withdrawn personality disorders.

The child with a passive-aggressive personality disorder suffers from repeated anxiety attacks which, for the most part, are well controlled; but, he can only defend himself against his anxiety by seeking a more passive state which contrasts with the aggressive behavior he displays when his anxieties become to strong. To offset a further buildup of anxiety, he finds an outlet for his frustrations. Perhaps he breaks a window in the presence of the school principal--for no apparent reason--or hits a child twice his size in the restroom after recess. In the hospital he may be the perfect patient for three days; the afternoon before he is to return to a stress-filled home, he must react. He seems tense, though still able to talk about his problems; then suddenly he becomes violently aggressive, apparently fully expecting and apparently wanting punishment for the aggression.

Such behaviors are caused in part by this child's inability to understand and isolate his anxiety-inducing problems, which are real and have a situational base. At the same time, he has foreboding fears of other anxieties building up which may not have any basis in reality. This combination results in the transient changing of behavior from a passive state to an overt-withdrawn or overt-aggressive state.

Children with such problems draw attention to themselves in schools, hospitals, and society most of the time. It is difficult to generalize about the etiology of their condition, but some of the more

common reasons are rejection by parents, inability to meet parental expectancy, fears promoted by unsuccessful social interaction, academic or athletic failure, and fears instilled by peers or parents. The taxing dilemma for treatment of such a child is his simultaneous need for acceptance, punishment, and a concrete existence, which he understands, to consistently guide and structure his life's decisions.

JUVENILE DELINQUENCY

One of the major categories of social disability is juvenile delinquency. This is so closely linked to sociocultural problems that delinquency appears most frequently in areas where there is poverty, adult crime, or a constellation of community conditions that are grouped under the names of anomie or social disorganization. Susceptibility to influences of the physical environment, intellectual level, and family background interact and affect a person's leaning toward delinquency or conformity. Research on the delinquent, his social group, and his community indicates that sociological and psychological factors, personality, and social pressures are all determinants of delinquency behavior.

Quay (1965), focusing on the "legal sense" of the term, defines delinquency as follows:

> The delinquent is a person whose misbehavior is a relatively serious legal offense, which is inappropriate to this level of development; is not committed as a result of extremely low intellect, intracranial organic pathology, or severe mental or metabolic dysfunction; and is alien to the culture in which he has been reared. Whether or not the individual is apprehended or legally adjudicated is not crucial [p. 12].

Delinquency, of course, is a form of misbehavior, but not all misbehavior is delinquency, even when it is inappropropriate for the age of the individual. Both the quality of the behavior and the degree of social deviance are factors in judging an antisocial act appropriately.

Gibson and West (1970) studied eighty-seven boys who were classified as unofficial early delinquents on the basis of reports made by teachers, community members, or delinquent acts. Two hundred ninety-four additional boys, up to age fourteen, free of any delinquent act or referral, were also included in the study. A third group of delinquents consisted of four hundred eleven boys in the age ranges of eight to nine when first seen. In the older half of the sample were boys fifteen years of age or more. Their offenses were almost exclusively petty stealing. The boys were classified according to family type, and seven characteristics of social handicaps were defined. These seven component items were: supported by family, low occupational status of father, poor housing, poorly kept accommodations, inadequate income, six or more children in the family, and physical neglect.

Essentially, the implications that low to average intelligence is a feature of early delinquents rather than delinquents in general compliment evidence that has been gathered by a number of researchers. On the measures of verbal and nonverbal ability at the earlier age, on the scale of social handicapped, the boys who subsequently became chronically disruptive were found to be substantially lower in IQ and to have come predominantly from the most impoverished and socially deprived families.

These findings seem compatible with everything that we know and the uniqueness of the findings in this case is the predictability for intervention with young pre-delinquent offenders. The word "young" is critical in this case and implies youth who may well be brought to the attention of legal officials by age eight at the latest. That means, as odd as it sounds, that preventative activities need to be initiated in kindergarten of the public schools.

Of course, when we describe the youth as having low intelligence, we are not suggesting mental retardation. We are suggesting, probably, a relationship between two common social variables. Verbal ability and language comprehension, two products of society, are also related to social status of the family. It is well recognized that reading scores in verbal intelligence test scores and socioeconomic factors correlate highly with most identifiable samples of youth. The added component for delinquency in this case is one more symptomatic outgrowth of poverty, and inability to utilize education to

lift oneself, and the attitude of families towards school as an imposing authority within the life structures once it has been established that a family is on the bottom of the social pile. Thus, a comedy of tragic errors results which is cyclic and self-reinforcing. The major social question is where and how to break it.

What are the causes of delinquency? Certainly, the inconsistencies and incontinuities between theoretical positions as to the nature of delinquency have impeded the understanding of what its causes are. It is the position of this paper that delinquency is a mosaic, that it has no single cause, just as it has no single concomitant. The sequel of a delinquent act is also a multidimensional aspect.

Hirschi (1969) has advanced a control theory which postulates that delinquent behavior is an extension of the individual's bond to society's weaknesses as that individual determines them. This empirical theoretical approach certainly is worth review. The bond has several aspects or component parts: attachment; caring about others--their opinions, their expectations; commitment--time and energy committed to self, time and energy committed to the community or the destruction of the community; but more importantly, time invested in conventional kinds of behaviors, involvement, including belief in the values of the societal order in the particular societal aspects one finds himself.

Hirschi views these components as general related and as having some independent effects on the possibility that youth will initiate chronically disruptive behavior.

Delinquency is represented in the nature, interpretation, reinforcement, frustration, or hostility that the youth has in attitude with the bond between himself and society. The bulk of Hirschi's analysis focuses on his group of approximately thirteen hundred white males in California. His major dependent variables is the recency index which is composed of several questions regarding the involvement in delinquent behaviors. His questions include: "Have you ever taken little things that did not belong to you?" "Have you ever taken things of large value that did not belong to you?" "Have you ever taken a car for a ride without the owner's permission?" "Have you ever banged up something that did not belong to you on purpose?" "Not counting fights that you have had with a brother or sister, have you beaten up on anyone or hurt anyone on purpose?" These questions are used to establish the bond, as the recency index, as a simple sum across all acts.

Part of Hirschi's control theory postulates that attachment to school is similarly related to delinquency. Those who do poorly in school reduce their bond and hence have school-related difficulties which, in part, are delinquent acts, for example, truancy. The attachment to peers, depending on the peers' value structure, can be of a similar nature. Commitments to conventional kinds of activities

are suggested: an athlete, committed to sports' principles, is less likely to be a delinquent than a youngster who admires big cars and certainly cannot own one but could steal one.

The theory in essence is brief and to the point. Control theory postulates that delinquency does not result from a failure to interact with the social order, but instead delinquency occurs because the youth adapts beliefs that delinquent behavior is a viable alternative to the social order. Specifically, it is Hirschi's position that attachment to parents generates a wider concern for the approval of persons in positions of authority and ultimately a belief that societal norms bind one's conduct. Thus, attachment to conventional beliefs and the moral validity of their roles are not independent. The question of delinquency seems always to be one of cult--peer expectancy, peer pressure, or "the gang." The general assumption is that most delinquency is a group or gang phenomenon. The literature on delinquency seems to suggest that many delinquents depend upon the values of the gang. The history on delinquency gang structures started with Shaw and McKay (1942) whose original data show that the predominance of delinquent disruptive acts involves more than one youngster. For all practical purposes, gangs are defined as "a frequent offender who had committed more than less of his or her offenses in the presence of a companion."

Thrasher (1963) and Sutherland (1955), who worked on group structure in urban settings, brought about a furthering of the emphasis

on groups of youth who seem to have as their purpose the displaying of chronically disruptive behavior. Cloward and Ohlin's (1960) book, Delinquency and Opportunity: A Theory of Delinquent Gangs, established an almost sociological tradition of focusing on gang delinquency. Tannenbaum (1966) issued a theory showing that the cornerstone of all chronically disruptive acts is group phenomena.

DeFleur (1967) stressed the importance of not confusing peer groups with gangs. She determined "among the sixty-three hard-core delinquents, forty-nine planned to be members of some type of group with regular associations." Two such groups were made up of only two persons and for the present analysis these were eliminated. The remaining forty-seven respondents were found to have some general degree of gang membership but little allegiance. It was her work that for the first time seemed to stress the fact that most of the theories on gang structures were generalities.

Empey (1967) cites that the incidence of group delinquency is between sixty and ninety percent. He cites six separate studies to confirm these figures and adds that most studies confirm the results. In another study, Empey and Rabow (1961) state: "The greater part of delinquent behavior is not that of individuals engaging in highly secretive deviations, but is a group phenomenon--a shared deviation, which is a product of differential group experience in a particular subculture."

The problem, then, is one of agreeing on a definition of group or gang. Klein, in 1969, takes extreme issue with most of the group delinquency theories as at least being sloppy in terminology. He would have us adopt a neutral term rather than gang or group using companionate behavior. Haney and Gold, in Psychology Today in 1973, clearly state their opinion in a review of recent research that delinquency is companionship in crime-shared experiences, but not necessarily a gang experience.

These authors studied four hundred thirty-three teenagers committing two thousand, four hundred, ninety delinquent acts. The majority of these acts, seventy percent, were in the presence of others. The lone offense tended to be the impulsive one, such as striking a parent and running away, etc.

Usually, then, the delinquent acts are shared experiences. About forty-one percent were with one other person, twenty-three percent with two others, fifteen percent with three others, nine percent with four others, and only twelve percent with five or more others. The offender and companion were generally the same sex (seventy percent) and the delinquent rarely committed an offense with the same partner twice. In fact, in that study only eleven teenagers committed more than half of his or her offenses with a most frequent companion. Those eleven youths committed a hundred thirty-four offenses. It is also interesting to note that of the eleven who committed frequent crimes in companionship frequently with the same people, four were

girls. It may be that female gang membership is higher than male. There was also some evidence that children of parentage in higher socioeconomic classes tend to be more gang oriented than the more commonly thought of youngsters from the lower socioeconomic classes. If that is indeed a fact and can be verified, it will greatly reverse earlier theorization.

It would appear that two different issues have coincided to the point that an assumption has been made about their relationship. The myth that delinquency is gang-oriented behavior is directed from the fact that as one proceeds down the socioeconomic ladder, incidence of delinquency seems to increase. There is a clustering of youth who are prone to have difficulty with the school, difficulty with constructive community acts, and are plagued with trouble. In the eyes of many, this group comprises a gang. It may be that they hang out in the same places, that they are seen together, and upon occasion they even commit delinquent acts together. But the frequency of those commitments is rare.

Secondly, there are the fortuitous and multitudinous theories that delinquency is a result of peer pressure, gang relationships, and that the values of the gang are the ones that the delinquent holds most dear. Most of those theories have not been proven and in almost any attempt to define the values or mores of a gang, it is learned that delinquency is generally an impulsive act, not a planned act. Running away, truancy, stealing a car, and destructive behavior are generally

not planned or premeditated. It is spur of the moment. In fact, one of the largest distinctions between blue-collar and white-collar crime, between crime of youth and crime of adults, is the amount of impulsivity versus the amount of meditation that precedes it.

The controversy over whether delinquents have been fairly described as constituting a gang subculture is certainly not answered. Rathus and Siegel (1973) attempted to study the attitudes of delinquent gang members towards the rest of society. They hypothesized that if a subculture existed, then there would be variance between the attitudes that subculture held toward conventional groups, and that a clear pattern of self-esteem among the constituents of the delinquent subpopulation would be discernible. In their research, delinquents were defined as youth on probation. Nondelinquents were defined as students with no record of adjudication.

Sixty-three male delinquents, ranging from sixteen to twelve years of age, were randomly selected from three hundred such offenders in upper New York state. A semantic differential technique was used to evaluate adjective pairs that have opposite meaning on a seven-point scale. The concepts rated were: self, policemen, law, education, work, managing money, and crime. The delinquents did not differentiate themselves in attitudes from nondelinquents on the education, work, and saving money variables. They did distinguish themselves in the negative relationship between delinquents' attitudes

towards criminal justice. In fact, they distinguished between the criminal institutions and the personnel.

These considerations seem to suggest that race, socioeconomic status, type of offense, adjudication, disposition, and clinical impressions are not good indicators of delinquency, its types and subpopulations, nor do they imply heterogeneity in the values and attitudes, peer relationships, and gang memberships or associations in human relationship of youth with another.

IMPORTANT CONSIDERATIONS IN DELINQUENCY

Sex. In most western countries, the ratio of male to female delinquents is about six to one; in some countries, it is ten to one. Parsons (1967) holds that this ratio is the most illustrative indication of societies' different standards for the sexes. A society might look favorably on a male who takes a "joy ride" in a stolen car. His adventure may be regarded as an assertion of masculinity; the same behavior by a woman would be frowned upon since obedience and gentle behavior are expected from them. Something similar may be true of boys' feelings toward their mother at puberty. The stronger the mother's control, the stronger the act of breaking it. In families of low socioeconomic status, when the father image is weak or even absent, relatively many crimes are committed by adolescent children.

But the crimes committed by girls in this situation are generally quite different from those of boys.

Age. The age at which an individual performs his first deviant act is very important. Glueck and Glueck (1956) found that, on the whole, if the acts of delinquency begin very early in life, they are abandoned at relatively early stages of adulthood. Conversely, if such acts begin later, they may be abandoned, provided the natural processes of maturation are not interfered with by a treatment agency, school, parent, or community.

In most western countries, mean age in delinquency is decreasing. In industrial countries, rate of crime by adults is going down; crime by juveniles is going up. The incidence of delinquency is generally highest during early adolescence; a mean age of 14 years is found in many countries. By age 21, the amount of criminal activity decreases quite substantially; however, severity of the crimes usually increases with age.

Social Class. The social class to which a person belongs, as well as the culture, influences what he learns to accept as correct norms for him to observe. Cohen (1965) writes: "What we see when we look at the delinquent subcultures . . . is that it is nonutilitarian, malicious, and negative." [p. 25] It is defined by its "negative polarity" to the norms of "respectable society." In delinquent subcultures, behavioral norms and values are at variance with those of the

culture at large. The delinquent's conduct is normal by the values of his subculture, but wrong according to the larger culture.

THE FAMILY AS THE PRIMARY SOCIAL "SUBCULTURE"

The home is the primary subcultural environment in which the parents establish tone and conditions and, to a large extent, shape their children's behavior. Yet a child's interaction with parents and immediate environment always remains at an individual level. Though their environment might be conducive to producing "delinquent children," one can only discuss a particular "delinquent child" in the light of the particular events that have interacted to produce the behavior which society sees as inappropriate. And in speaking about a particular individual and his delinquency, precise observations must be made in reference to the causative factors, time events, and place of his delinquency behavior.

Delinquency studies in high-risk neighborhoods in various cities have sometimes found that even brothers in the same family may differ considerably in regards to their respect for social values. It may happen that a policeman, a minister, and a criminal come from the same family. The obvious fact is that no two people are alike genetically nor respond to their environment in like ways. Even if it were possible to create an ideal environment in home and school, it

would not be so for more than one person. The mother who works to treat all her children alike, denying one a birthday party because his brother does not want one, has not treated her children as individuals. She may have denied one the very consideration that would have promoted his social growth. On the other hand, to force both brothers to have birthday parties would be just as inequitable, especially if one brother were as socially retiring as the other was socially outgoing.

Family breakdowns are occurring in our society with increasing regularity as evidenced by rising divorce rates, changes in role relationships among family members, and the social disorganization that accompanies advancing urbanization. Delinquency is also increasing steadily, which may suggest a relationship of the above factors to both family stability and the social adjustment of children. Except for orientals and blacks, delinquency occurs about twice as frequently among the children of immigrants as among those of native-born parents (Conger & Miller, 1966). Parental prestige, the foreign Language factor, and the change from a simple rural to a complex urban environment are all contributing factors. First-generation parents may themselves have difficulty adapting to the new environment. Parental inability to guide their children, due to their own limited experience in a new cultural setting, may contribute to role model deficiencies. Our middle-class culture frequently restricts boys from lower classes in the achievement of material possession. In considering this matter, Cloward and Ohlin (1960) noted that

delinquents repeatedly wanted "big cars," "flashy clothes," and "swell dames."

> These symbols of success, framed primarily in economic terms rather than in terms of middle-class life styles, suggest . . . that the participants in delinquency subcultures are seeking higher status within their own cultural milieu. If legitimate paths to higher status become restricted, then the delinquent subculture provides alternative avenues. . . [p. 96].

Other studies have shown delinquents to be either highly motivated to obtain material possessions and comforts (Cartwright, Howard, & Short, 1966) or frustrated by a lack of economic and social status. They cite the emphasis upon gang membership among lower-class youths as one way of meeting the needs for feelings of personal worth and peer acceptance to overcome what they feel are deficiencies in material possessions and social position.

INCIDENCE OF SOCIAL MALADJUSTMENT

The purpose of examining delinquency in some detail was to acquaint the reader with the factors that are associated with it. However, there are many socially troubled youths who do not violate society's values but whose problems interfere with their own adjustment.

In 1954, MacFarlane, Allen, and Honzik reported data collected longitudinally since 1929 on 252 children who were part of the

Berkeley survey. The survey drew its sample from one of every three children born between January 1, 1928, and June 30, 1929. Eighty-six children were available for study in their fourteenth year, enabling the investigators to sample forty-six possible problem areas. The results showed that problems of speech, elimination of fears, thumbsucking, overactivity, destructiveness, and temper declined with age. Nail-biting was the only problem to increase with age, subsiding by age 14. Problems such as insufficient appetite and lying rose to a peak and then subsided. Several problem areas showed a twin peaking effect, one occurring at the time of school entrance and the other at adolescence. These were evidently situational problems likely to appear when a child is under stress. Included in this group are restless sleep, disturbing dreams, physical timidity, irritability, attention demanding, overdependence, somberness, and jealousy. Table 1 shows the areas of problem behaviors occurring for one-third or more of the boys and girls at each age level.

The only problem which had no evident relationship to age was that of oversensitivity, which persisted in girls throughout the years of the study but dropped dramatically in boys after age 11. Oversensitivity is an observable behavior, frequently displayed as a reaction to a fear such as that of meeting expectancy (measuring up to what others think). The early adolescent girl may fear social situations such as parties, etc., because she has facial acne; or she may have too timid a voice to receive a part in the junior play.

TABLE I

BEHAVIOR PROBLEMS SHOWN BY ONE-THIRD OR MORE OF THE BOYS AND GIRLS AT EACH AGE LEVEL

		Age													
		1 3/4	3	3 1/2	4	5	6	7	8	9	10	11	12	13	14
Enuresis (diurnal & nocturnal)	B	+													
	G	+													
Soiling	B														
	G														
Disturbing Dreams	B										+				
	G						+				+	+			
Restless Sleep	B	+													
	G														
Insufficient Appetite	B														
	G						+								
Food Finickiness	B		+												
	G	+	+	+			+								
Excessive Modesty	B														
	G														
Nailbiting	B													+	+
	G									+		+			
Thumbsucking	B														
	G	+	+												
Overactivity	B		+	+	+	+		+	+	+					
	G		+	+	+	+									
Speech	B														
	G														
Lying	B			+	+	+	+		+						
	G			+	+	+	+								
Destructiveness	B														
	G														
Overdependence	B														
	G														
Attention Demanding	B														
	G														

TABLE 1 (continued)

BEHAVIOR PROBLEMS SHOWN BY ONE-THIRD OR MORE OF THE BOYS AND GIRLS AT EACH AGE LEVEL

		Age													
		1 3/4	3	3 1/2	4	5	6	7	8	9	10	11	12	13	14
Oversensitiveness	B			+	+	+		+	+	+	+	+	+		
	G			+	+	+	+	+	+	+	+	+	+	+	+
Physical Timidity	B														
	G			+		+									
Specific Fears	B		+	+	+	+	+	+	+	+		+			
	G	+	+	+	+	+	+	+	+			+			
Mood Swings *	B										+	+		+	
	G							-	-	-		+			
Shyness *	B	-	-	-	-	-	-	-							
	G											+			
Somberness	B					+									
	G						+								
Negativism	B			+		+									
	G				+										
Irritability	B														
	G														
Temper	B	+	+	+	+	+	+	+	+	+	+	+	+	+	
	G	+	+	+	+	+	+	+				+			
Jealousy	B					+			+	+	+	+	+	+	
	G			+		+		+			+				
Excessive Reserve *	B	-	-	-	-	+						+	+		
	G					+	+	+	+	+	+	+	+		+

* - Data not obtained.

From: MacFarlane, Allen, & Honzik, 1954, p. 155.
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Another major finding in this study was the differing patterns in sibling birth order. First-born boys were more withdrawn and tended to internalize their problem much more than those occupying another position in the birth order. Younger children were seen to be more aggressive and competitive than their older siblings. First-born girls appeared to have more problems and difficulty in coping with stress situations. Of all the findings presented by MacFarlane, et al. (1954), the most important one was that most problem behaviors did not persist throughout the age range. Children seem to enter periods when several problems are manifest, around 5 to 7 years of age, subsiding by 11 to 12. The most frequently occurring problems were overdependence, somberness, and irritability, all of which tend to begin and end between the ages of 5 and 14. The authors concluded with a rather concise statement:

> May we pay our respect to the adaptive capacity of the human organism, born in a very unfinished and singular dependent state into a highly complex and not too sensible world. Unless handicapped by inadequate structure and health, and impossible and capricious learning situations, he treads his way to some measure of stable and characteristic patterning . . . [p. 154].

Another study of maladjustment (Lapouse & Monk, 1959) used the survey technique to study a sample of 482 children between 6 and 12 years of age by interviewing mothers in their homes in Buffalo, New York. They found more intense and higher incidences of worries and fears in lower socioeconomic children, younger children, and blacks. An examination of the characteristics covered by the survey

suggests that most of the concerns manifested by children could be considered normal.

Children live under many stress situations, a stress situation being defined as one that denies comfort and tends to promote threat. A trip to the family physician may be a pleasant visit for an adult, but for the child it may produce fears and worries that result in many inappropriate and attention-getting behaviors. The overt behaviors listed in Table 2 may not have clear direct relationships with the real fears or worries that may produce them. They may be only symptomatic representations of the child's real problems, or no problem at all. Child A may bite his fingernails to alleviate anxiety produced from the fear of failing to achieve his parents' expectancies. Child B may bite his fingernails to remove irritating dirt. Fingernail biting is a symptom; the point is, a symptom of what?

The relativity of problem behaviors, or at least troublesome behaviors or misbehaviors, is reflected in Zeitlein's (1957) report that as high as 41% of the entire student age school population was cited once or more for misbehaving during the school year. Of the misbehaviors reported, 82% involved problems of disturbance, disobedience, and disrespect. Boys were more frequent offenders than girls. It was also reported in this study that children from higher socioeconomic homes, with higher IQ's, did better academically in school, and children with greater popularity were better adjusted than children who lacked these attributes.

TABLE 2

THE PREVALENCE OF SOME BEHAVIOR CHARACTERISTICS IN A WEIGHTED REPRESENTATIVE SAMPLE OF 482 CHILDREN AGED 6 TO 12 AS REPORTED BY THEIR MOTHERS

		Percent
1.	Fears and worries, seven or more present	43
2.	Bedwetting within the past year	
	all frequencies	17
	once a month or more	8
3.	Nightmares	28
4.	Food intake	
	less than "normal"	20
	more than "normal"	16
5.	Temper loss	
	once a month or more	80
	twice a week or more	48
	once a day or more	11
6.	Overactivity	49
7.	Restlessness	30
8.	Stuttering	4
9.	Unusual movements, twitching, or jerking (tics)	12
10.	Biting nails	
	all intensities	27
	nails bitten down (more severe)	17
11.	Grinding teeth	14
12.	Sucking thumb or fingers	
	all frequencies	10
	"almost all the time"	2
13.	Biting, sucking, or chewing clothing or other objects	16
14.	Picking nose	26
15.	Picking sores	16
16.	Chewing or sucking lips or tongue or biting inside of mouth	11

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Incidents of problems in delinquent youth were reported in a study by Eisner (1969). He analyzed data from San Francisco, dividing the children according to several variables. Making separate tabulations for boys and girls found in other studies, boys showed delinquent behaviors averaging six times higher than girls. The ratio varied in different city census tracts, the lowest ratio being 3-1/2 to 1. In one San Francisco census tract, the boys' rate was nine times that of the girls.

Dividing the individual groups of boys and girls by race and age and comparing four age divisions among the five groups, the author viewed the problems of delinquency for each sex and race at each age. (See Table 3.)

The data in Table 3 indicate that delinquency rates varied considerably with race. The lowest delinquency rates for both boys and girls were among Chinese, a fact that was true at all ages except for the very youngest boys (eight to ten years old). In order of increasing delinquency rates, the racial breakdown showed a progression from Chinese to white, "other," white-Spanish, and black. The highest rates for both sexes at all ages were for blacks.

The black group displayed rates about two and one-half to three and one-half times as high as the average Chinese. Seventeen-year-old blacks, in fact, had an average delinquency rate of 575 per 1,000; over half were either warned by the police or sent to juvenile court in

TABLE 3

DELINQUENCY RATES (1960) BY SEX, RACE, AND AGE

INTERACTIONS	MALES (age in years)				FEMALES (age in years)			
	8-10	11-13	14-16	17	8-10	11-13	14-16	17
All Interactions:								
White	10	47	167	210	1	6	28	27
White-Spanish	18	62	251	444	2	9	36	33
Negro	35	146	381	575	5	39	86	60
Chinese	8	26	54	72	0	1	10	3
Other	3	82	189	310	0	20	54	46
Juvenile Court Cases:								
White	8	33	84	86	0	6	22	10
White-Spanish	13	36	99	173	2	9	31	13
Negro	29	118	252	295	5	37	78	36
Chinese	5	20	40	46	0	1	10	3
Other	2	67	124	184	0	18	49	22

From: Eisner, The Delinquency Label, 1969, p. 35.
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the course of a year. The rate of juvenile court citations for the black group as a whole was 295 to 1,000.

Table 4 represents the number of delinquents by race, sex, and family income. Unexpectedly, the highest numbers did not appear in the lowest income groups except for black girls. Girls of all the other races, and white, white-Spanish, and "other" boys were in maximum family annual income levels between $2,500 and $5,000. The highest number of delinquents were black and Chinese boys whose parents were in the $5,000 to $10,000 annual income bracket. The findings that maximum numbers of delinquents were in middle-income groups were true for this study and do not agree with many studies which frequently report most delinquents to come from the lower-income groups.

Table 5 takes into account the number of parents in the home. The preliminary results showed that the number of parents in the home was a factor that affected delinquency labeling. However, the study of this factor did not produce consistent effects. The presence of two parents in the home was associated with low delinquency rates. The highest rates were found when there was only one parent; but there were exceptions in the case of Chinese girls and "other" girls. However, the pattern seems clear. Juveniles who have no parents in their homes have delinquency rates slightly above those who have both parents. Older children with delinquency rates were also more likely to come from broken families.

TABLE 4

JUVENILE COURT DELINQUENCY RATES (1960) BY SEX, RACE, AND INCOME

Race	MALES				FEMALES			
	0-$2,500	$2,500-$5,000	$5,000-$10,000	Over $10,000	0-$2,500	$2,500-$5,000	$5,000-$10,000	Over $10,000
White	20	70	20	3	8	19	3	0
White-Spanish	18	62	11	2	9	13	3	0
Negro	81	104	121	3	30	22	9	0
Chinese	3	11	14	2	0	2	2	0
Other	6	63	21	0	12	18	4	0

From: Eisner, The Delinquency Label, 1969, p. 37.
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TABLE 5

JUVENILE COURT DELINQUENCY RATES (1960) BY SEX, RACE, AND NUMBER OF PARENTS IN THE HOME

	MALES			FEMALES		
	Number of Parents			Number of Parents		
Race	2	1	0	2	1	0
White	20	65	23	3	18	10
White-Spanish	19	64	28	5	15	6
Negro	44	100	47	11	31	14
Chinese	9	15	22	1	3	0
Other	27	34	35	10	9	14

From: Eisner, The Delinquency Label, 1969, p. 38.
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Eisner (1969) contended that both the definition and statistics of delinquency need overhauling. The common statistic that 4% of the ten- to seventeen-year-old group are apprehended by policemen in a year is misleading.

> The delinquency rates of high-risk groups are sufficient, I believe, to force a complete reevaluation of the usual concept that delinquents are deviants, that is, that they differ in their attributes from the "normal" boys of the community. If three out of four 17-year-old Negro boys in two large districts of San Francisco are recorded as delinquent in the course of a year, I submit that the deviant in this group is the one boy in four who does not become delinquent. But if delinquency is not due to deviant members of the group, one is driven to the conclusion that the entire group, at least by police standards, must live a life that is opposed by the rest of the community. We should speak of deviant groups, not deviant individuals. The delinquent in this group is the normal member of his society. Psychotherapy will not cure his delinquency; and a cure of delinquency will not help him to get along in his society--indeed, it may very well alienate him from his friends and associates. [p. 43]

The citizenry of the great middle-class culture have many status needs, but they frequently fail to recognize the status needs of delinquent youth who reside in different subcultures. There is no general society for them; the society we know is the particular subculture in which we live. Why, then, do we repeatedly ask others to join our society when we fail to understand theirs?

Middle-class values are the standards by which most behaviors are judged. That event suggests that an obvious discrepancy exists between two value structures that are commonly called social classes--the middle class acting in the capacity of judge; the lower social

classes are the judged. It is probably true that ". . . more lower status youngsters commit delinquent acts more frequently than do higher status youngsters." (Gold, 1966, p. 27). The fact still remains that one class of society sets the relative social condition by which others are determined adequate or inadequate. The types of delinquent acts between lower, middle, and upper classes are not different. There is evidence that directly disputes the claims of Cloward, Ohlin, Cohen, and Merton, namely, that boys in the higher social strata are just as involved in delinquency affairs as are boys in the lower strata. (Voss, 1966). Frease (1973) writes:

> While our data do not deal with kinds of delinquent behavior but rather delinquent behavior per se, it is engaging to note that a variation on all these themes involves the kinds of delinquent behavior observed vis-a-vis class position. Some show on the one hand that the higher status boys become more involved in property destruction and the more "serious" kinds of offenses, while low status youth are "more inclined to smoke regularly, skip school, fight, and use narcotics." On the other hand, Cohen theorizes that lower-class delinquency is characterized, in part, by its destructive and malicious nature." [p. 444]

However, it is true that being born white and middle class gives a youth advantages in securing a person's position in society. As a result, blue-collar youngsters tend to rise in the system, displacing white-collar youth. The consequence of this mobility is to blur visible class boundaries. The language, dress, and manner of all classes of youth in the 1930's made it virtually impossible for the officials to distinguish blue-collar delinquents from middle-class youth.

Empey and Erickson (1966) add that: "It was our impression that virtually all of these officially serious respondents had low status roots . . . it was not until we gathered objective data on their background that we discovered that we were wrong. The regular 'uniform' was being worn by middle as well as low status boys."

In effect, even if the police were interested in differential law enforcement by class, it may be virtually impossibie to do so. The intra-group similarity of delinquents would prevent this. At any rate, social class, using our data, does not appear to be a satisfactory criteria for predicting delinquency. What, then, might be a better predictor?

Frease (1973) writes:

> It is a basic truism in an industrial culture that material success and amount of formal education are positively correlated so that for the most part, later occupational and material achievement require earlier educational triumphs of at least modest proportions.

Frease advances several reasons for the problems associated with lower- and middle-class difficulties having a common antecedent with school. The first reason is that of poor school achievement by middle-class youth, no matter what the reason. Certainly, many youth, especially males, fail in school, and it is more than pure speculation that the pressure of home and school alike are greater for the middle-class youth. Frequently, a middle-class youth failing the system takes refuge in lower-class attitude, dress, and rebellious

attitude, with the primary rebellion against the school and other authority.

> If a person perceives himself as relatively worthless, a poor student, and an object of derision, it is quite likely he will behave accordingly. With this category of individual, we would expect poor school and work performance. Since these two areas of school and work are so inexorably bound together in an industrial culture, performance in one is often positively correlated with performance in the other. [Frease, 1973, p. 450]

Labeling has become a major factor in special education in the last four or five years. It is now recognized that labeling youth has a major two-dimensional consequence. On the one hand, youth who are labeled, take on the characteristics implied by the label. The second aspect of labeling is therefore the teacher's self-reinforcing attitude that she need not teach because the child cannot make use of the teaching.

> In addition to the points made above, it can be argued that one reason stigmatized youngsters, regardless of class origins, generally do so poorly in school is because they are not taught. Part of the labeling process involves isolation and the perception on the part of the teacher that the student is less capable mentally; as a result, the teacher tends to regard much beyond a minimum level of instruction as basically wasted time. Teachers, irrespective of statements in instructors' manuals to the contrary, are no more free of prejudice than anyone else.
>
> Of course, this attitude is readily transmitted to the boy by a host of interpersonal cues radiating from the school system. He is counseled away from the college pipeline and into the pseudo-vocational pipeline, away from Shakespeare and into wood shop where, chances are, an ill-equipped, unmotivated, and inferior teacher awaits him.

> It is my view that both white- and blue-collar delinquents generally exhibit behavior in school that is in opposition to the educational establishment's norms. On the other hand, lower- and middle-class nondelinquents exhibit behavior similar to each other, and together conform to the white-collar system of the school. School performance rather than class, then, becomes the key notion. [Frease, 1973, p. 451]

McClintock and Bottoms (1973) initiated a long-term study on the reasons for the failure of the Borstal System to prevent recidivism in England. Their work commenced in 1962. It was primarily a research effort to understand the reasons institutional treatment was not achieving bigger success. They found that age 18 was the median age for arrests and convictions of youthful offenders, representing 33% of the total number of offenders. A breakdown of nonviolent crimes committed by youth by category revealed that 35% were property destruction offenses and 29% were offenses against another person, which also included personal robbery. Table 6 provides the percent of offenders for each type of criminal activity.

McClintock and Bottoms (1973) also provide data on the length of criminal activity in relation to the offender's age (Table 7), age relationship between just correction and initial institutionalizations (Table 8), type of offense and evidence of criminal associations (Table 9), and distribution of offenders according to degree of previous recidivism and type of current offense (Table 10).

Younger offenders have shorter recorded periods of criminal activities. Older criminals, above 19, tend to demonstrate chronic

TABLE 6

BREAKDOWN, BY CATEGORY, OF NONVIOLENT CRIMES COMMITTED BY YOUTH

	Main Categories of Crime	Number of Offenders	Percent
I.	Offenses against the person (including robbery)	88	(28.8)%
II.	Breaking offenses (not involving personal violence)	106	(34.6)%
III.	Thefts* (not connected with violence or breaking offenses)	57	(18.6)%
IV.	Theft or unlawful taking of motor vehicles (not involving other theft)	39	(12.8)%
V.	Damage to property	5	(1.6)%
VI.	Other crimes	11	(3.6)%
		306	(100.0)%

* Thefts here include frauds, false pretenses, and receiving stolen property. (McClintock & Bottoms, 1973, p. 13)

TABLE 7

LENGTH OF RECORDED CRIMINAL ACTIVITY
IN RELATION TO OFFENDER'S AGE

Length of Criminal Record in Years	Younger Offenders (aged under 19) No.	%	Older Offenders (aged 19 or 20) No.	%	Total No.	%
less than 1	29	34.2	15	16.6	44	25.2
1 less than 2	22		11		33	
2 less than 3	15	14.8	18	21.6	33	18.3
3 less than 4	7		16		23	
4 less than 5	24	31.6	25	33.8	49	32.6
5 less than 6	23		28		51	
6 less than 7	14	13.4	10	10.8	24	12.1
7 less than 8	6		7		13	
8 less than 9	6	6.0	9	17.2	15	11.8
9 less than 10	3		10		13	
10 +	-		8		8	
Totals	149	100.0	157	100.0	306	100.0
Mean Length	3.8		4.9		4.3	

TABLE 8

AGE OF THE OFFENDERS
ON SENTENCE TO BORSTAL
SHOWN ACCORDING TO AGE AT FIRST CONVICTION

Age at First Conviction		Age at Sentence to Borstal				
		17 or less	18	19	20	Total
Less than 13	No.	22	25	25	13	85
	%	7.2	8.2	8.2	4.2	27.8
13 or 14	No.	10	28	30	12	80
	%	3.3	9.1	9.8	3.9	26.1
15 or 16	No.	12	22	17	18	69
	%	3.9	7.2	5.6	5.9	22.6
17 +	No.	5	25	20	22	72
	%	1.6	8.2	6.5	7.2	13.5
Totals	No.	49	100	92	65	306
	%	16.0	32.7	30.1	21.2	100.0

TABLE 9

TYPE OF CURRENT OFFENSE
SHOWN ACCORDING TO THE NUMBER OF CRIMINAL ASSOCIATES

Type of Current Offenses		"Major" Offenses* (total)	Alone	In Pairs	In Groups	"Minor" Offenses (total)	Alone	In Pairs	In Groups
Robbery, etc.		58	9	19	30	2	1	1	-
Sex Crime		2	1	-	1	3	3	-	-
Violence (not with property)		11	5	-	6	12	3	3	6
Breaking Offenses		99+	28	33	37	7	-	5	2
Thefts, etc.		30	12	13	5	27	16	5	6
Taking Cars, etc.		23	12	8	3	16	6	9	1
Damage		4	1	2	1	1	-	-	1
Others		3	3	-	-	8	7	-	1
Totals	No.	230+	71	75	83	76	36	23	17
	%	100.0	30.9	32.6	36.1	100.0	47.4	30.3	22.3

Minor offenses were significantly more often committed alone - $P < .01$.

* "Major" offenses are as defined in the classification on p. 25. In violent offenses, attacks on strangers are treated as major, plus neighborhood and domestic offenses where weapons were used. See note 11, p. 437.

\+ In one case of a major breaking offense, the number of associates was not recorded.

TABLE 10

DISTRIBUTION OF OFFENDERS ACCORDING TO DEGREE OF PREVIOUS RECIDIVISM AND TYPE OF CURRENT OFFENSE

Type of Current Offenses		Total Offenders	No. of Previous Occasions on Which Convicted			Proportion with 3 or more %
			Less than 3	3 or 4	5 or more	
Robbery, etc.	No.	60	27	18	15	
	%	100.0	45.0	30.0	25.0	55.0
Violence, etc.*	No.	28	15	8	5	
	%	100.0	53.6	28.6	17.8	46.4
Breaking	No.	106	14	33	59	
	%	100.0	13.2	31.1	55.7	86.8
Thefts, etc.	No.	57	8	21	28	
	%	100.0	14.0	36.9	49.1	86.0
Taking Cars, etc.	No.	39	4	14	21	
	%	100.0	10.3	35.9	53.8	89.7
Malicious Damage and others	No.	16	4	6	6	
	%	100.0	25.0	37.5	37.5	75.0
Totals	No.	306	72	100	134	
	%	100.0	23.5	32.7	43.8	76.5

* In this table the small number of sexual offenses has been included in the violence category.

criminal activities. The length of time between first conviction and sentencing decreases with age. It is generally true that most juvenile courts attempt to keep youthful offenders on first offenses from institutionalization. Minor thefts are higher for youth not associated with other youth, but robbery and thefts of major proportion generally occur with youth working in relationship to other youth, or even gang members. Except for violent crimes against another person, including robbery and nonpersonal robbery (property), all other crimes increase with the number of convictions.

SOCIAL MALADJUSTMENT AND OTHER HANDICAPS

Earlier in this chapter the discussion of delinquency was related to all types of social, family, and economic conditions. In the discussion, however, we did not relate delinquency to other handicaps, as few studies have been conducted to interrelate the variable of social disability and other handicaps.

Children with social maladjustments are generally thought to have normal mental and physical capabilities. Some are handicapped, however, encompassed by social maladjustment and additionally by other physical or mental deficits. However, a child handicapped with a social maladjustment is not usually considered multihandicapped because the social disorder is secondary to the primary mental or

physical handicap. A primary handicap is used to describe a child with a disability or handicap unrelated to any other handicap. The social maladjustment is an overlay to the primary mental or physical handicap and is considered a secondary handicap. It is important that the nurse make a distinction between secondary, primary, and social maladjustments evidenced by the handicapped child if she is to provide realistic care. An eight-year-old child may become difficult to manage upon admission to the hospital and separation from his mother. The cause could be the child's desire to obtain attention, and he may have learned that he can achieve this by demonstrating aggressive and distinctive behavior. On the other hand, these behaviors could be secondary to a primary condition of mental retardation. The aggressive behaviors displayed by the child in this case would be a secondary reaction or social emotional overlay, reflecting the limited mental development and adaptive behavior level of the handicapped child rather than intentionally divertive behavior.

The so-called "defective delinquent" is a child with mental retardation and delinquency. In 1951, Westwell reported that a committee of members from the American Association on Mental Deficiency (AAMD) met to study the problems of the defective delinquent. They concluded:

> A mentally defective delinquent is any person affected with intellectual impairment from birth, or from an early age, to such an extent that he is incapable of managing himself and his affairs; who is charged with, arraigned for, or convicted of a criminal offense; and who for his

> own welfare and the welfare of others in the community, requires supervision, control, or care; and who is not insane or of unsound mind to such an extent as to require his commitment to an institution for the insane. [p. 285]

There seems to be no real relationship between the degree of intelligence and delinquency. Kvaraceus (1964) has interpreted defective delinquency in terms of Dollard's theory that frustration leads, in turn, to aggression. This is borne out in the retarded delinquent because he has less tolerance for frustration. This is not to say that there are more delinquents in the retarded range of intelligence because this is not true. The mentally retarded are seemingly more easily apprehended by the police, whether or not they had a major or minor role in the delinquency act performed. The most significant attribute relating IQ and delinquency is the variable of social-cultural influences. These range for the delinquent from poor home conditions and parental training to mistreatment within a poor nonunderstanding community environment. Blackhurst (1968) reviewed information on various aspects of mental retardation and delinquency and reported on twelve alternative hypotheses to account for the relationship between delinquency and retardation other than low IQ. They were:

1) There is a "relatively higher incidence of mental retardation among the socially, economically, and culturally deprived segment of our population, which also produces the proportion of prison inmates." (Allen, 1966, p. 4)

2) When negative correlations between intelligence and delinquency are found, they can be attributed "to the association with delinquency of that constellation of cultural factors which adversely affect the test score." (Woodward, 1955, p. 282)

3) There are more commitments and fewer paroles for mentally retarded individuals accused of crimes (Glueck, 1935); thus, one might expect the incarcerated population to be lower in intelligence.

4) Many times, retarded individuals are used as pawns by more intelligent ring leaders and are apprehended more easily. (Wallace, 1929).

5) Delinquent individuals from good homes, and who have high IQ scores, are often returned to their homes, if it appears that the parents are able and willing to provide adequate control. (Mann & Mann, 1939)

6) The retarded often make more mistakes while committing crimes and are not clever in eluding pursuit. (Wallace, 1929)

7) Very often, delinquency is accompanied by emotional instability, which can result in lower scores on intelligence tests. (Burt, 1923)

8) Retarded females who engage in illicit sexual activities are more frequently apprehended than normal females who engage in similar acts.

9) Criminals often score lower on tests of intellectual ability because of errors of a specific sort; they disobey instructions and are more impulsive in the testing situation. This is characteristic of extroverts, and there are more extroverts in the delinquent than in the normal population. (Payne, 1961)

10) Often, the retarded do not have sufficient funds to provide for adequate defense counsel and are subsequently convicted. (Wallace, 1929)

11) Delinquents may have low educational attainment, thus handicapping them on verbal IQ tests. For example, one group of delinquents had mean verbal IQ scores of 82, but had mean performance IQ scores of 98 on the WISC. (Payne, 1961)

12) Many times a diagnosis of mental retardation in the criminal population has been arrived at by using a mental age score of 11 or 12 years as a criterion. Wallin (1924) indicated that with this as a criterion, 47% (44,556,000) of whites and 89% (9,309,400) of Negroes would have been classified as mentally retarded in 1922 (based on World War I army records). It is apparent that the use of norms established for children, as in the example above, is an unacceptable practice when testing adults and would lead to inflated estimates of lowered intelligence in the criminal population. (Zeleny, 1933, pp. 381-382).

Mulligan (1969) wrote concerning the origin and characteristics of dyslexia (reading disability) and concomitant delinquency problems. He confirmed earlier studies about illiteracy and its association with antisocial behaviors. He found that 60% of most known delinquents were youths with two or more years of academic reading retardation. He also described the need for closer diagnostic study of delinquent nonreaders to determine if both conditions could have common antecedents. A criminologist (Keldgold, 1969) attempted to establish brain damage as that common antecedent of delinquency and other problems

in a study of apprehended youths. Taylor (1969) reviewed the literature and reported on 100 epileptic children. He concluded that aggressiveness in these patients was less likely to be a result of present interference in brain structures and more likely to be a result of early brain damage to mental control structures. His findings suggest that to prevent learned behavior problems, parental management and special training considerations are needed early.

Believing that the handicapped must be recognized as people, Gruhn and Krause (1968) examined the psychological and social adjustment of 35 female and 38 male vocational high school students with significant handicaps of all types by means of sociometric procedure and standardized questionnaires completed by students and teachers. In comparing these handicapped individuals to a nonhandicapped group, both showed similar adjustments on the sociometric scale, self-concept, and teacher evaluation. The handicapped had a far greater need for friends, were rigid in view of self, and had a significantly reduced level of aspiration.

Mitchell (1970) investigated differences in "Barrier" scores between groups assessed as either high or low in their adjustment to the stress induced by severe physical disability. The Barrier score, an index of adjustment to reality, was constructed of positive social and vocational goals. The subjects were 48 paraplegics and 48 quadraplegics. The high- and low-scoring paraplegics were significantly different on various social, adaptive, and personality measures.

There was no significant difference between quadraplegic groups who scored high and low. The study indicated that the amount of physical involvement does not critically interfere with adjustment until that point where the lack of physical function interferes with personal and vocational success and, therefore, independence.

Ossowski (1969) found that the motivation of blind youth to respond to stress--consisting of heightened emotional tension, action to satisfy primary drives, or basic needs--was determined by the types of stress, perception of stress, self-appraisal capabilities, resistance to stress, and whether one's disability might be exposed by counteracting stress. Their choice of actions was motivated by:

1) fear of being juxtaposed with the public,
2) fear of being made aware of their handicaps, and
3) striving to show that blindness is not the worst handicap.

Nihiro, Foster, and Spencer (1968) established the need to understand the basic parameters of coping behaviors, which in the retarded vary considerably in nature and content, according to the level of retardation in the physically handicapped. Even if this is so, it may be very hard for normal social reactions to occur because the disability seemingly attracts so much attention as to detract from an interpersonal relationship between the handicapped and the physically normal person. Davis (1961) found that the interaction between the physically impaired and the "normal" person was characterized by an

overcompensation of the normal person for the handicapped. This limited the relationship, the behaviors were rigid, and the sentence structures in consideration were short.

It is useful to understand how the normal person reacts to physical impairment in others. "Aesthetic aversion" can be seen in the reactions of normal children to physical deviance (impairment) in other children. (Barker, 1964) For example, groups of 10- to 12-year-old children (N = over 600) consistently ranked children's pictures according to their liking of them in the following order--from most to least liked--a normal child, a child with crutches and a leg brace, a child in a wheel chair, a child with a left forearm amputation, a child with a slight facial disfigurement, and an obese child. (Richardson & Royce, 1968) The same ordering was found using a social distance technique with drawings in a high school sample. The obese child, who had an aesthetic impairment, was the least liked by girls; and the forearm amputee, who had a functional impairment, was the least liked by boys in both age groups. (Matthews & Westie, 1966) Racial variables made no difference in the rank ordering. (Richardson & Royce, 1968)

Unfortunately, children's negative attitudes seem to increase with age (Billings, 1963) and are not overcome by social contact with the deviant. (Richardson, 1969) Shears and Jensema (1969) suggested, on the basis of 94 young adults' social distance evaluations and rankings of ten anomalies with respect to desirability in a friend and as a

self-affliction, that six dimensions combine and interact to form attitudes toward deviants: visibility, communication, social stigma, reversibility, degree of incapacity, and difficulty in daily living. Perhaps children are more critical of physically visible and social stigma in their consistently high rejection of the obviously handicapped child. This possibility is suggested by 186 high school students' responses of 12 exceptionalities, using a paired comparison questionnaire. (Jones, Gottfried, & Owens, 1966) In this study, the more visible disabilities led to greater rejection regardless of the social context described; but the ordering of less visible anomalies interacted with social context.

The nature of social interaction and social status relates closely to an individual's emotional adjustment, whether judged by self-concept (Wylie, 1967) or by personality traits (Coopersmith, 1967). In study after study, the social acceptability of children, from preschool to college age, has been found to relate significantly and positively to personality or emotional adjustment and negatively to anxiety. The criteria for adjustment included teachers' ratings (Kwall, Smith, & Lachner, 1967), degree of initiation of verbal interaction with peers, independence from adults, responses to projective techniques such as the Rorschach (Northway & Wigdor, 1947), creative thinking (Yamamoto, Lembright, & Corrigan, 1966), and responses to anxiety scales (Ueda, 1964). Usually, however, researchers have examined responses to self-concept and/or

social-personal adjustment on questionnaires. The nature of the relationship is unclear, but a slight positive relationship occurs quite consistently in experimental studies, regardless of the size, sex, socioeconomic status, or heterogeneity of the sample. Therefore, one would expect socially unaccepted children, such as physical deviates, to show poorer emotional adjustment than more accepted children.

> In view of their generally negative public reception and of the "looking-glass" nature of self-concepts, it is no wonder that those who are deviant are inclined to be frustrated, unhappy, and often hostile . . . No matter how visible their stigmata, individuals will attempt to "cover" them; the extra "performance" required (Goffman, 1959) drains the deviants' energy and their failure to minimize their defects tends to discourage them. [p. 113]

In conjunction with the opinion of Yamamoto, et al., (1966) is the finding that self-descriptions of 107 nine- to eleven-year-old handicapped children, when compared to those of nonhandicapped children, showed more expression of personal inadequacy and uncertainty and more general self-depreciation. (Richardson, Hastorf, & Dornbusch, 1964)

Ferrell, Tokstad, Listella, and Jackson (1969) report on a program for so-called defective delinquents in returning them to society through a sequenced set of activities. They describe the program as a re-educational process reflecting a model of the normal socialization process. The two basic assumptions were: (1) factors primarily inherent in the organism that would be operative even within a normal environment, and (2) a nonnormal childhood environment

which has provided either subnormal social stimulation or abnormal experiences during the socialization process. [p. 6]

They write:

> In summary, the following have emerged as the chief characteristics of this treatment program for defective delinquents: (1) an assumption of normality of patients with respect to their dignity and capacity for rationality and responsibility; (2) confrontation of patients with and responsibility for effects of their own actions; (3) participation by patients and staff in decision-making; (4) an open system of communication; (5) flexibility and expansiveness of the role system. [p. 7]

The method of evaluating the effectiveness of the program was to analyze where residents went upon leaving the ward. All of the residents who no longer were on the ward were placed in a category described as: community environment (job placement with family), vocational training environment (halfway house), more open institutional environment (more freedom, less structure), similar institutional environment (similar freedom, structure), less open institutional environment (correctional institution), patient is AWOL and remains out.

Table 11 shows the before and after results of the program. A significantly greater number of patients were rehabilitated after the inception of the new program. Chi square was significant at better than the .01 level. One very important finding is that there were no significant differences in age or intelligence for those residents capable of successfully demonstrating good adjustment after leaving

TABLE 11

MOVEMENTS OF PATIENTS FROM WARD
BEFORE AND AFTER INCEPTION OF PROGRAM[1]

Category of Movement	Number of Patients	
	Before	After
A. Community Environment	2	7
B. Vocational Training Environment	0	1
C. Institutional Environment: Open	5	9
D. Institutional Environment: Similar	12	0
E. Institutional Environment: Less Open	3	2
F. AWOL	0	1

[1] The data were obtained for two periods, 22 months before and 22 months after the initiation of the new treatment program on the ward. (Ferrell, et al., 1969, p. 8)

the ward. The mean age of the entire population was 24.66, and the mean intelligence was 64.19.

> Other researchers have noted that IQ does not seem to be an important factor in the successful community placement of the nondelinquent retardate (Windle, 1962). Our results suggest that IQ may be equally unrelated to the rehabilitation of the male defective delinquent. [p. 8]

RECIDIVISM

The rate of recidivism for adjudicated youth has reached levels of 70% to 85%. The serious question raised by the prevalence of recidivism reflects on the current practices of management and amelioration. One problem in the treatment of delinquency is that the definitions of delinquency are vague and ambiguous. There has been a pronounced practice for treatment agencies to group delinquents together for rehabilitative purposes. In spite of the variation in youth classified as delinquent, the practice of homogeneous grouping in institutions continues, thus exposing the questionable nature of institutionalization as practiced for norm-violating youth.

Most treatment agencies tend to function upon a primary rationale of economics. The greatest economic advantages of such programs occur merely as an artifact of the pre-existing social organization of services. (Feldman, Wodarski, Goodman, & Flax, 1973). Feldman, Wodarski, Goodman, and Flax suggest "the ultimate economic efficacy of a program must depend primarily upon a single

intention, namely, the extent to which the treatment program is successful in enabling clients to maintain long-term social adjustment in the open community." However, as is so obviously apparent, available data do not validate the criterion, especially in the areas of antisocial children and juvenile delinquents.

In order to delimit the harmful effects of "rehabilitation" on the youth's self-concept as well as others' view of them, it would seem essential that such programs operate in an atmosphere where these effects are not transmitted. If treatment programs could function among peers not labeled as delinquent, their stigmatizing effects would be eliminated. The case against treatment via segregation is increasing. The awareness of concerned people needs to be shared including the evolution data of treatment programs, at least those which are accountable.

In another study (Ganzer & Sarason, 1973) several variables were isolated and found to be directly associated with recidivism among juvenile delincuents. Recidivists got into trouble and were first institutionalized at younger ages, had lower estimated verbal intelligence, and were more frequently diagnosed as sociopathic personalities than were nonrecidivists. Females more frequently came from personally and socially disorganized families than did males. Background variables consisted of (1) marital status of natural parents, (2) socioeconomic states, and (3) family contact with law enforcement agencies. Only a slightly greater proportion of

recidivists than nonrecidivists came from broken homes. Socio-economic status is not related to recidivism for either sex, and there was no appreciable difference between recidivists and nonrecidivists in family contacts with the police, but strong sex differences were present.

TREATMENT RELEVANCE

Martinson and his team (1974) delved into rehabilitation programs of the New York State Parole System. The author states: ". . . a rather bald summary of our findings: with few and isolated exceptions, the rehabilitative efforts that have been reported so far have had no appreciable effect on recidivism." A previous study by New York State (1964) found that for young males as a whole, the degree of success achieved in the regular prison academic education program, as measured by changes in grade achievement levels, made no significant difference in recidivism rates. Jacobson and McGee (1965) studied a program of "skill re-education" for institutionalized young males consisting of 10 weeks of daily discussions aimed at developing problem-solving skills. Overall, the program produced no improvement in recidivism rates.

Similarly, a study on vocational training was conducted by Zivan (1966) at the Children's Village in Dobbs Ferry, New York. There was a logical sequencing of steps in preparation for the youth's

adequate adjustment in a vocation: assessment counseling, development counseling, and pre-placement counseling. In addition, they participated in an occupational orientation consisting of role-playing presentations via audio-visual aids, field trips, and talks by practitioners in various fields of work. Furthermore, the clients were prepared for work by participating in the Auxiliary Maintenance Corps, which performed various chores in the institution. After release from Children's Village, a boy in the special program received supportive after care and job placement aid. There was no difference in recidivism rates.

A question may be raised as to the viability of the content of vocational training programs to the offender's subsequent life outside the prison. Gearhart, Keith, and Clemmons (1967) reported vocational education to be nonsignificant in affecting recidivism rates. However, they found that when a trainee succeeded in finding a job related to his area of training, he had a slightly higher chance of becoming a successful parolee. Yet in a comprehensive special education program for institutionalized women in Milwaukee in which practical and academic training--such as reading, writing, spelling, business filing, child care, and grooming--was administered, there was no difference in the women's rates of recidivism (Kettering, 1965). There is substantial evidence that the relationship of the skill development programs and the offender's life outside the prison is at best a weak one. The only indication that such a relationship even exists is provided by those parolees who

matriculate through the institutional training program and adapt successfully to a vocational placement outside the prison. In these few cases, moreover, the success rates can be traced to the success of those offenders in the training programs, and very often self-motivation forces them to pursue extra training. Consequently, recidivism cannot be attributed entirely to the nature of the training programs, for example, strategy employed or mission of the training program, regardless of the particular kind of training, that is, whether or not the training was indeed demonstrably relevant or irrelevant. Perhaps the type of educational and skill improvement doesn't have much to do with an individual's propensity to commit a crime. In any case, to date, education and skill development have not reduced recidivism by rehabilitating criminals.

An interesting finding is that when programs that have been administered successfully in institutions are applied in a noninstitutional setting, the results do not report encouraging findings. (Martinson, 1974) This should explain something of the worth of such programs, assuming that the phenomenon of deviant behavior is one which differs not in kind from normal behavior but rather differs in degree. One study of a noninstitutional skill development program by Kovacs (1967) described the New Start Program in Denver, in which offenders participated in vocational training, role playing, programmed instruction, group counseling, college class attendance, and trips to art galleries and museums. Kovacs found no significant improvement

in recidivism rates among the noninstitutionalized persons over the incarcerated persons. Even in a case of milieu therapy programs (Empey, 1967) in Provo, Utah, which did develop strong controlling norms for the behavior of individual members, the total results showed no significant improvement in recidivism rates compared with boys on regular probation. However, Empey did find that both the Provo boys and those on regular probation did better than those in regular reformatories. Another study on nonresidential milieu therapy found not only that there was no significant improvement, but also that the longer a boy participated in the treatment, the worse he was likely to do afterwards. Feldman, et al., conducted a summer camp program consisting of antisocial and prosocial children. They found that sufficient training and a prosocial peer environment can maximize the positive effects of such an experience for antisocial children.

INDIVIDUAL COUNSELING

Many proponents of the personal interaction of a treatment program or programmer with the offender may focus their attention on helping the offender with those "deeper" problems that caused their maladjustment. However, upon examining programs incorporating this feature, it is difficult to find grounds for enthusiasm. Two studies by Guttman (1963) at different institutions found such treatment

to be ineffective in reducing recidivism rates, and in one of those studies the investigator found such treatment was actually related to a slightly higher parole violation rate. Adams (1959b and 1961) also found a lack of improvement in parole revocation and first suspension rates. A crucial factor in these two studies, which places the most variance with the previous studies, is the "speciality" of those subjects treated successfully. Parsons (1967) said that if a boy was judged to be "successfully" treated as opposed to simply being subjected to the treatment experience, he did tend to do better. He found a significant difference of community adaptation between groups, as well as a trend for therapy returnees, to commit fewer offenses. Amenable boys who got treatment did better than nontreated boys. On the other hand, "non-amenable" boys who were treated actually did worse than they would have done if they had received no treatment at all. This study suggests that there is something to be hoped for in treating properly selected amenable subjects; and that if these subjects are not properly selected, one may wind up doing more harm than good.

The effects of psychotherapy (Adams, 1959a) administered by a psychiatrist or a psychologist resulted in parole rates almost two-and-a-half times higher than if such treatment were administered by a social worker without this specialized training. Martinson (1974) felt the data provided a favorable outlook not only for alternativ forms of individual therapy but also may suggest that counseling and casework programs assume the primary role in rehabilitation. To suggest that

this type of therapy is a favorable "alternative" is a grand assumption in view of the fact that there is a dearth of any steadfast workable programs and approaches established. The only American study which provides a direct measure of the effects of individual counseling--a study of California's Intensive Program (California, 1958a) which was "psychodynamically" oriented--found no improvement in recidivism rates. This study directly influenced the de-emphasis upon individual counseling in the California penal system.

GROUP COUNSELING

Shelly and Johnson (1961) used a "pragmatic" casework program directed towards the educational and vocational needs of institutionalized young adult males in a Michigan prison camp. After six months of treatment, those inmates possessing good attitudes were correlated with parole success. However, Shelley and Johnson were not able to measure the direct impact of the counseling on recidivism rates.

Young female offenders were studied by Adams (1959a) and Taylor (1967). Adams found there was no improvement in treating girls by group rather than individual methods. Taylor came to a very similar conclusion, aside from the finding that when girls treated by group therapy did commit new offenses, these offenses were less serious than the ones for which they had originally been incarcerated. Similarly, Truax, Wargo, and Silber (1966) found that girls subjected to group

psychotherapy and then released were likely to spend less time reincarcerated in the future. However, this particular study points out a possible essential ingredient for the success of any treatment program. The therapists in this program were chosen for their "empathy" and "nonpossessive warmth;" in other words, for their special personal attributes of the therapists. Thus, group and individual counseling programs seem to work best when the subjects are amenable to treatment and when the counselors are not only trained but also "good" people as well. (Martinson, 1974)

MILIEU THERAPY

The attempt to create a supportive, nonauthoritarian, and nonregimented atmosphere, and to enlist peer influence in the formation of constructive values, is really too all-encompassing and must therefore be used in conjunction with group and/or individual counseling. The aim of the therapy is to enable the inmate's whole environment to be directed towards true correction rather than towards custody or punishment. This kind of therapy with adult prisoners was reported as a failure in two studies--Robinson and Kevotkian (1967) and Kassebaum, Ward, and Wilner (1971).

Out of five studies of milieu therapy administered to juveniles, Lavlicht (1962) and Jesness (1965) report that there was either no significant effect or that there was a short-term effect that wore off with

passing time. Positive effects of Miller's therapy are reported from the Highfields program. Freeman and Weeks (1956) and McCorkle, Elias, and Bixby (1958) reported that boys in the program had lower recidivism rates (as measured by parole revocation) than a similar group spending a longer time in the regular reformatory.

PRE-RELEASE PROGRAMS

There is promising evidence that parole and probation may provide a key to the reduction of juvenile recidivism rates. A British study reported that when probation was granted more frequently, recidivism rates did not increase significantly. (Wilkins, 1958) Another study by the state of Michigan in 1963 reported that an expansion in the use of probation actually improved recidivism rates.

Babst and Mannering (1965) compared a group of parolees, excluding convicted murderers and sex criminals, with a similar group that had been put on probation. They found that the probationers committed fewer violations if they had been first offenders, and did no worse if they were recidivists. A major drawback to this study, however, is that the behavior of these groups was being measured by separate organizations, by probation officers for the probationers and by parole officers for the parolees. It is not clear what the results would have been if subjects had been released directly to the parole organization without having experienced prison first. In the comparison

of a suspended sentence plus probation for first offenders with a one-year prison sentence, only first offenders under 20 years of age did better on probation; those from 21 to 45 actually did worse (Shoham & Sandberg, 1964). Whereas Babst and Mannering had found that parole rather than prison brought no improvement for recidivists, Shoham and Sandberg reported that for recidivists with four or more prior offenses, a suspended sentence was actually better, though the improvement was much less when the recidivists had committed a crime of violence.

While both the Babst & Mannering and Shoham & Sandberg studies suggest the possible value of suspended sentences, probation, or parole for some offenders (though they contradict each other in telling us which offenders), there is a generally pessimistic conclusion concerning the limits of the effectiveness of treatment programs. This is because they found that the personal characteristics of offenders--first offender status, or age, or type of offense--were more important than the form of treatment in determining future recidivism. An offender with a "favorable" prognosis will do better than one without, it seems, no matter how you distribute "good" or "bad," "enlightenment" or "regressive" treatments among them.

Martinson undertook a six-month search of any reports published in the English language regarding attempts at rehabilitation made in our correction systems and those of other countries from 1945 through 1967. The search resulted in 231 methodologically sound studies. He states: "With few and isolated exceptions, the

rehabilitative efforts that have been reported so far have had no appreciable effect on recidivism."

The complications are: (1) the groups in the studies were "exceedingly disparate," nullifying or certainly jeopardizing that what "works" for one kind of offender also works for others; (2) there was little attempt to replicate studies; thus, stability and reliability needs buttressing line of the term "recidivism rate" was not uniform; there was a great lack of consistency in what the term referred to, for example, "failure" measures such as arrest rates or parole violation rates, or "success" measures such as favorable discharge from parole or probation.

> We have been able to draw very little on any systematic empirical knowledge about the success or failure that we have met when we have tried to rehabilitate offenders, with various treatments and in various institutional and noninstitutional settings. [Martinson, 1974, p. 98]

REFERENCES

Adams, Stuart. Assessment of the psychiatric treatment program: First interim report. Research Report No. 14, California Youth Authority, June 30, 1959a. (mimeographed)

Adams, Stuart. Assessment of the psychiatric treatment program: Second interim report. Research Report No. 15, California Youth Authority, December 13, 1959b. (mimeographed)

Adams, Stuart. Assessment of the psychiatric treatment program, Phase I: Third interim report. Research Report No. 21, California Youth Authority, January 31, 1961. (mimeographed)

Allen, R. C. Toward an exceptional offender's court. Mental Retardation, 1966, 4, 3-7.

Babst, D. V. and Mannering, J. W. Probation versus imprisonment for similar types of offenders: A comparison by subsequent violations. Journal of Research in Crime and Delinquency, 1965, 2 (2), 60-71.

Barker, D. G. Concepts of disabilities. Personnel and Guidance Journal, 1964, 43, 371-374.

Billings, H. K. An exploratory study of the attitudes of noncrippled children toward crippled children in three selected elementary schools. Journal of Experimental Education, 1963, 31, 381-387.

Blackhurst, A. E. Mental retardation and delinquency. Journal of Special Education, 1968, 2, 379-391.

Burt, C. Delinquency and mental defect. British Journal of Medical Psychology, 1923, 3, 168-178.

Cartwright, D. S., Howard, H. K., and Short, J. F., Sr. The motivation of delinquency. Unpublished manuscript, 1966.

Cloward, R. A. and Ohlin, L. E. Delinquency and opportunity: A theory of delinquent gangs. Glencoe, Illinois: Free Press, 1960.

Cohen, A. Delinquent boys. Glencoe, Illinois: Free Press, 1965.

Conger, J. J. and Miller, W. C. Personality, social class, and delinquency. New York: John Wiley and Sons, 1966.

Coopersmith, S. The antecedents of self-esteem. San Francisco: W. H. Freeman and Co., 1967.

Davis, F. Deviance disavowal: The management of strained interaction by the visibly handicapped. Social Problems, 1961, 9, 120-132.

DeFleur, L. B. Delinquent gangs in cross-cultural perspective: The case of Dordoba. Journal of Research in Crime and Delinquency, January 1967, 4, 132-141.

Eisner, V. The delinquency label: The epistemology of juvenile delinquency. New York: Random House, 1969.

Empey, L. T. Delinquency theory and recent research. Journal of Research in Crime and Delinquency, January 1967, 4, 28-42.

Empey, L. T. and Erickson, M. L. Hidden delinquent and social status. Journal of Social Forces, 1966, 44, 546-554.

Empey, L. T. and Rabow, J. The provo experiment in delinquency rehabilitation. American Sociological Review, October 1961, 26, 679-695.

Feldman, R., Wodarski, J., Goodman, M., and Flax, N. Pro-social and antisocial boys together. Social Work, 1973, 18 (5), 26-36.

Ferrell, C. R., Tokstad, G. C., Listella, G. M., and Jackson, J. Influence of a therapeutic community on behavior and adjustment of defective delinquents. Mental Retardation, 1969, 7 (6), 6-9.

Forman, B. The effects of differential treatment on attitudes, personality traits, and behavior of adult parolees. Unpublished Ph. D. dissertation, University of Southern California, 1960.

Frease, D. E. The schools, self-conceptual juvenile delinquency. British Journal of Criminology, 1972, 12, 133-146.

Frease, D. E. Delinquent social class in the school. Sociological and Social Research, 1973, 4, 443-459.

Freeman, H. E. and Weeks, H. A. Analysis of a program of treatment of delinquent boys. American Journal of Sociology, 1956, 62 (1), 56-61.

Ganzer, B. and Sarason, I. Variables associated with recidivism among juvenile delinquents. Journal of Consulting and Clinical Psychology, 1973, 40, 1-5.

Garrity, D. L. The effects of length of incarceration upon parole adjustment and estimation of optimum sentence: Washington state correctional institutions. Unpublished Ph. D. dissertation, University of Washington, 1956.

Gearhart, J. W., Keith, H. L., and Clemmons, G. An analysis of the vocational training program in the Washington state adult correctional institutions. Research Review No. 23. State of Washington, Department of Institutions, May 1967. (processed)

Gibson, H. B. and West, D. J. Social and intellectual handicaps of precursors of early delinquency. British Journal of Criminology, 1970, 10, 21-32.

Glueck, E. T. Mental retardation and juvenile delinquency. Mental Hygiene, 1935, 19, 549-572.

Glueck, E. and Glueck, S. Physique and delinquency. New York: Harper and Brothers, 1956.

Goffman, E. The presentation of self in everyday life. Garden City, New York: Doubleday, 1959.

Gold, M. Undetermined delinquent behavior. Journal of Research in Crime and Delinquency, January 1966, 3, 27-46.

Gruhn, H. and Krause, S. On the social behavior of physical handicapped children and teenagers. Probleme und Ergebnisseder Psychologie, 1968, 23, 73-86.

Guttman, E. S. Effects of short-term psychiatric treatment on boys in two California Youth Authority institutions. Research Report No. 36, California Youth Authority, December, 1963. (processed)

Haney, B. and Gold, M. The juvenile delinquent nobody knows. Psychology Today, 1973, 7, 49-55.

Hirschi, T. Causes of delinquency. Berkeley, California: University of California Press, 1969.

Jacobson, F. and McGee, E. Englewood project: Re-education: A radical correction of incarcerated delinquents. Englewood, Colorado: 1965. (mimeographed)

Jesness, C. F. The Fricot Ranch study: Outcomes with small versus large living groups in the rehabilitation of delinquents. Research Report No. 47, California Youth Authority, October 1, 1965. (processed)

Jones, R., Gottfried, N. W., and Owens, A. The social distance of the exceptional: A study at the high school level. Exceptional Children, 1966, 32, 551-556.

Kassebaum, G., Ward, D., and Wilner, D. Prison treatment and parole survival: An empirical assessment. New York: Wiley, 1971.

Keldgold, R. E. Brain damage and delinquency: A question and a challenge. Academic Therapy, 1969, 4, 93-99.

Kettering, M. E. Rehabilitation of women in the Milwaukee county jail: An exploration experiment. Unpublished Master's thesis, Colorado State College, 1965.

Klein, M. W. On the group context of delinquency. Social Science Research, 1969, 54 (1), 63-71.

Kovacs, F. W. Evaluation and final report of the New Start Demonstration Project. Colorado Department of Employment, October, 1967.

Kvaraceus, W. C. Mental retardation and norm violation. Journal of Education, 1964, 147, 17-24.

Kwall, D. S., Smith, J. T., Jr., and Lachner, F. M. Functional relationship between sociometric status and teacher ratings, expiration level, academic, and parent-child variables. Proceedings of the 75th Annual Convention of the APA, 1967, 2, 285-286.

Lapouse, R. and Monk, M. A. Fears and worries in a representative sample of children. American Journal of Orthopsychiatry, 1959, 29, 803-818.

Lavlicht, J., et al. In Berkshire Frams Monographs, 1962, 1 (1), 11-48.

MacFarlane, J. W., Allen, L., and Honzik, M. P. A developmental study of the behavior problems of normal children between twenty-one months and fourteen years. Berkeley, California: University of California Press, 1954.

Mann, C. W. and Mann, H. P. Age and intelligence of a group of juvenile delinquents. Journal of Abnormal Social Psychology, 1939, 34, 351-360.

Martinson, R. What works?--questions and answers about prison reform. The Public Interest, 1974, 35, 22-54.

Matthews, V. and Westie, C. A preferred method for obtaining rankings: Reactions to physical handicaps. American Sociological Review, 1966, 31, 851-854.

McClintock, F. H. and Bottoms, A. E. Criminals coming of age. London: Heiman Educational Books Limited, 1973.

McCord, W. and McCord, J. Two approaches to the cure of delinquents. Journal of Criminal Law, Criminology, and Police Science, 1953, 44 (4), 442-467.

McCorkle, L. W., Elias, A., and Bixby, F. L. The Highfields story: An experimental treatment project for youthful offenders. New York: Holt, 1958.

Mitchell, K. R. The body image barrier variable and level of adjustment to stress induced by severe physical disability. Journal of Clinical Psychology, 1970, 26, 49-52.

Mulligan, W. Study of dyslexia and delinquency. Academic Therapy, 1969, 4, 177-187.

New York State, Division of Parole, Department of Correction. Parole adjustment and prior educational achievement of male adolescent offenders, June 1957-June 1961. September, 1964. (mimeographed)

Nihiro, K., Foster, R., and Spencer, L. Measurement of adaptive behaviors: A descriptive system of mental retardates. American Journal of Orthopsychiatry, 1968, 31, 381-387.

Northway, M. L. and Wigdor, B. T. Rorschach patterns related to sociometric status of school children. Sociometry, 1947, 10, 186-199.

Ossowski, R. Behavior of blind youth under stress. Przeglad Psychologiczny, 1969, 18, 85-102.

Parsons, R. W. Psychological and behavioral change in delinquents following psychotherapy. Journal of Clinical Psychology, 1966, 22 (3), 337-350.

Parsons, R. W. Relationship between psychotherapy with institutionalized boys and subsequent community adjustment. Journal of Consulting Psychology, 1967, 31 (2), 137-141.

Pate, J. E. Exceptional children in the schools. Edited by L. M. Dunn, New York: Holt, Rinehart, and Winston, Inc., 1963.

Payne, R. W. Cognitive abnormalities. In H. J. Eysenck (Ed.), Handbook of abnormal psychology. New York: Basic Books, 1961.

Quay, H. C. Juvenile delinquency. Princeton, New Jersey: D. Van Nostrand Co., Inc., 1965.

Rathus, S. A. and Seigel, L. J. Delinquent attitudes and self-esteem. Adolescence, 1973, 8 (30), 265-276.

Reckless, W. C. The crime problem. New York: Appleton-Century-Crofts, 1967.

Richardson, S. A. The effect of physical disability on the socialization of a child. In D. A. Goslin (Ed.), Handbook of socialization theory and research. Chicago: Rand McNally, 1969, 1047-1064.

Richardson, S. A., Hastorf, A. H., and Dornbusch, S. M. Effects of physical disability on a child's description of himself. Child Development, 1964, 39, 467-480.

Richardson S. A. and Royce, J. Race and physical handicap in children's preference for other children. Child Development, 1968, 39, 467-480.

Richmond, J. B. Introduction. Mental retardation: A handbook for the primary physician. A report of the American Medical Association Conference on Mental Retardation, Chicago, Illinois, April 9-11, 1964.

Robinson, J. and Kevotkian, M. Intensive treatment project: Phase II. Parole outcome: Interim report. Research Report No. 27, California Department of Corrections, Youth and Adult Correctional Agency, January 1967. (mimeographed)

Sabatino, D. A. and Cramblett, H. G. Behavioral sequelae of California encephalitis virus infection in children. Developmental Medicine and Child Neurology, 1968, 10, 331-337.

Shaw, C. and McKay, H. D. Social factors in juvenile delinquency. Report on the Causes of Crime (Washington, D. C., US GPO, 1931), #3, Volume II. C. Shaw and H. McKay, Juvenile delinquency and urban areas (Chicago Press, 1942). Revised Edition, with a new introduction by James F. Short, Jr., 1969.

Shears, L. and Jensema, C. J. Social acceptability of anomalous persons. Exceptional Children, 1969, 36, 91-96.

Shelley, E. L. V. and Johnson, W. F., Jr. Evaluating an organized counseling service for youthful offenders. Journal of Counseling Psychology, 1961, 8 (4), 351-354.

Shoham, S. and Sandberg, M. Suspended sentences in Israel: An evaluation of the preventive efficacy of prospective imprisonment. Crime and Delinquency, 1964, 10 (1), 74-83.

Sutherland, E. H. Principles of criminology. 5th Edition, revised by Donald R. Cressey (New York: J. B. Lippincott Co., 1955).

Tannenbaum, F. Point of view. In Rose Giallombardo (Ed.), Juvenile delinquency: A book of readings. New York: John Wiley and Sons, 1966, 69-79.

Taylor, A. J. W. An evaluation of group psychotherapy in a girls' borstal. International Journal of Group Psychotherapy, 1967, 17 (2), 168-177.

Taylor, D. C. Aggression and epilepsy. Journal of Psychosomatic Research, 1969, 13, 229-236.

Thrasher, F. M. The gang: A study of 1,313 gangs in Chicago. Abridged and with a new introduction by James F. Short, Jr. Chicago: University of Chicago Press, 1963.

Truax, C. B., Wargo, D. G., and Silber, L. D. Effects of group psychotherapy with high adequate empathy and nonpossessive warmth upon female institutionalized delinquents. Journal of Abnormal Psychology, 1966, 71 (4), 267-274.

Ueda, T. A study of the stability of sociometric status among elementary school children: On the stability of choice received. Journal of Nara Gakugei University, 1964, 12, 135-154.

Voss, H. L. Socioeconomic status and reported delinquent behavior. Social Problems, 1966, 13, 314-324.

Wallace, G. L. Are the feebleminded criminals? Mental Hygiene, 1929, 13, 93-98.

Wallin, J. E. W. The education of handicapped children. Boston, Massachusetts: Houghton-Mifflin, 1924.

Westwell, A. E. The defective delinquent. American Journal of Mental Deficiency, 1951, 56, 283-289.

Wilkins, L. T. A small comparative study of the results of probation. British Journal of Criminology, 1958, 8 (3), 201-209.

Windle, C. D. Prognosis of mental subnormals. American Journal of Mental Deficiency, 1962, 66 (5)Monograph Supplement), 180.

Woodward, M. The role of low intelligence delinquency. British Journal of Delinquency, 1955, 5, 281-303.

Wylie, R. C. The self-concept. Lincoln, Nebraska: University of Nebraska Press, 1967.

Yamamoto, K., Lembright, M. L., and Corrigan, A. M. Intelligence, creative thinking, and sociometric choice among fifth grade children. Journal of Experimental Education, 1966, 34, 83-89.

Zeitlein, H. Phoenix reports on high school misbehavior. Personnel and Guidance Journal, 1957, 35, 384-387.

Zeleny, L. D. Feeblemindedness and criminal conduct. American Journal of Sociology, 1933, 38, 564-576.

Zivan, M. Youth in trouble: A vocational approach. Final report of a research and demonstration project, May 31, 1961-August 31, 1966. Dobbs Ferry, New York: Children's Village, 1966. (processed)

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